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Bib Data Sheet

CONFIRMATION NO. 4202

<b>SERIAL NUMBER</b> 10/802,273	<b>FILING OR 371(c) DATE</b> 03/17/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 31162B
<b>APPLICANTS</b> Gustavo C. Rodriguez, Glencoe, IL;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/528,963 03/21/2000 PAT 6,765,002 and is a CIP of 09/798,453 03/02/2001 which is a CIP of 09/528,963 03/21/2000 PAT 6,765,002 and is a CIP of 09/672,735 09/28/2000 PAT 6,511,970 which is a CIP of 09/532,340 03/21/2000 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/03/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 1
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 45867				
<b>TITLE</b> Prevention of ovarian cancer by administration of products that induce biologic effects in the ovarian epithelium				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	